

**MEDICAID PURCHASE PLAN (MAPP)
IMPAIRMENT RELATED WORK EXPENSES (IRWE) WORKSHEET**

Client Name	Social Security Number	Filing Date
Worker Number	CARES Case Number	PIN Number

Estimate the individual's annual IRWE expense costs and convert to a monthly amount using the list below as a reference. On-going expenses should be calculated using costs from the previous 12 months. At client option, one-time costs may be prorated over a 12-month period or deducted only for the month in which it will be incurred.

On the back side of this worksheet is a list of IRWEs. This is not an all-inclusive list.

IRWE Description	Total
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
MONTHLY IRWE TOTAL	\$

Examples of Impairment Related Work Expenses (IRWE):

- Attendant care services (at work, for transportation, other)
- Diagnostic procedures
- Durable medical equipment (plus installation, maintenance, and associated repair costs)
- Essential non-medical appliances and devices (electric air cleaner, etc.)
- Exterior home modifications that allow access to the street or to transportation (ramps, railings, pathways, etc.)
- Interior home modifications which create a work space to accommodate an impairment (enlargement of doorway, etc.)
- Interpreter (at workplace)
- Job Coach
- Medical devices
- Measuring instruments
- Mileage allowance (to and from work)
- Modified audio/visual equipment (enlarged monitor, speech-activated computer, etc.)
- Pacemakers
- Physical therapy
- Prostheses
- Reading aids
- Regularly prescribed medical treatment or therapy and physician's fees associated with this treatment
- Respirators
- Routine prescription drugs
- Special work tools
- Traction equipment, braces
- Typing aids
- Vehicle modification (plus installation, maintenance, and associated repair costs)
- Wheelchairs
- Work animal and associated costs (plus food, maintenance, and veterinary services)
- Workspace modifications (adjustable desk, etc.)
- Work subsidy (increased supervision, etc.)